

07/07/00
jc872 U.S. PTO

07-10-00

A/RE
REISSUE LITIGATION

Please type a plus sign (+) inside this box → ☐

PTO/SB/50 (4/98)
Approved for use through 9/30/00. OMB 0651-0033
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BROADENING REISSUE PATENT APPLICATION TRANSMITTAL

Address to:

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

Attorney Docket No.	MONY:140
First Named Inventor	Gerard F. Barry
Original Patent Number	5,776,760
Original Patent Issue Date (Month/Day/Year)	July 7, 1998
Express Mail Label No.	EL521270395US

APPLICATION FOR REISSUE OF:
(check applicable box)



Utility Patent



Design Patent



Plant Patent

APPLICATION ELEMENTS

- ☒ * Fee Transmittal Form (PTO/SB/56)
(Submit an original, and a duplicate for fee processing)
- ☒ Specification and Claims (amended, if appropriate)
including broadened reissue claims
- ☒ Drawing(s) (proposed amendments, if appropriate)
- ☐ Reissue Oath / Declaration (original or copy)
(37 C.F.R. § 1.175)(PTO/SB/51 or 52)
- Original U.S. Patent
☐ Offer to Surrender Original Patent (37 C.F.R. § 1.178)
(PTO/SB/53 OR PTO/SB/54)
or
☐ Ribboned Original Patent Grant
☐ Affidavit / Declaration of Loss (PTO/SB/55)
- Original U.S. Patent currently assigned?
☒ Yes ☐ No
(If Yes, check applicable box(es))
☐ Written Consent of all Assignees (PTO/SB/53 or 54)
☐ 37 C.F.R. § 3.73(b) Statement ☐ Power of Attorney

ACCOMPANYING APPLICATION PARTS

- ☐ Foreign Priority Claim (35 U.S.C. 119)
(if applicable)
- ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
- ☐ English Translation of Reissue Oath/Declaration
(if applicable)
- ☐ * Small Entity Statement(s) ☐ Statement filed in prior application,
(PTO/SB/09-12) Status still proper and desired
- ☐ Preliminary Amendment
- ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
- ☐ Other: _____

* NOTE FOR ITEMS 1 & 10: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

14. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

or ☒ Correspondence address below

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Signature	<i>Janelle D. Waack</i>	Date	July 7, 2000

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REISSUE APPLICATION FEE TRANSMITTAL FORM

Docket Number (Optional)

MONY:140

Claims as Filed - Part 1

Claims in Patent	For	Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity	
				Rate	Fee	Rate	Fee
(A) 2	Total Claims (37 CFR 1.16(j))	(B) 20	**** 18 =	x \$ ____ =	or	x \$ 18 =	\$324.00
(C) 1	Independent Claims (37 CFR 1.16(i))	(D) 13	* = 12	x \$ ____ =		x \$ 78 =	\$936.00
Basic Fee (37 CFR 1.16(h))					\$ ____	\$ 690.00	
Total Filing Fee					\$ ____	OR \$ 1,950.00	

Claims as Amended - Part 2

	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	***	MINUS	**	* = 0	x \$ ____ =	or	x \$ ____ =	0
Independent Claims (37 CFR 1.16(i))	***	MINUS	*****	= 0	x \$ ____ =		x \$ ____ =	0
Total Additional Fee					\$ ____	OR \$ 0		

* If the entry in (D) is less than the entry in (C), Write "0" in column 3.

** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.

*** After any cancellation of claims

**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).

***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).

☒ Please charge Deposit Account No. 01-2508/MONY:140/WAA in the amount of \$1,950.00.
A duplicate copy of this sheet is enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. 01-2508/MONY:140/WAA.
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☐ A check in the amount of \$ _____ to cover the filing / additional fee is enclosed.

July 7, 2000

Date


Signature of Applicant, Attorney or Agent of Record

Janelle D. Waack, Reg. No. 36,300

Typed or Printed Name